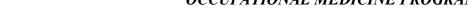
#### BY ORDER OF THE COMMANDER

# FAIRCHILD AIR FORCE BASE INSTRUCTION 48-101

30 JUNE 1995

Aerospace Medicine

OCCUPATIONAL MEDICINE PROGRAM



# COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction establishes procedures to be followed to effectively carry out the Occupational Medicine Program. It identifies those shops and areas whose personnel require periodic occupational physical examinations, and it explains how those examinations are performed. It tasks organization commanders to insure that their personnel receive the appropriate physical examinations.

#### SUMMARY OF REVISIONS

Office name changed to Public Health. Hazard Communication Training is addressed. Updated format IAW AFI 37-160 and made necessary changes to referenced publications which have been converted to new series/number etc. Minor administrative changes made.

**1. Applicability:** The instruction applies to all commanders, staff agencies, base organizations and activities, and military and civilian personnel assigned to Fairchild AFB.

### 2. References:

- 2.1. AFOSH STD 161-20, Hearing Conservation Program
- 2.2. AFI 44-102, Professional Policies and Procedures
- 2.3. AFPD 48-1, The Aerospace Medicine Program
- 2.4. AFOSH STD 48-19, Hazardous Noise Program
- 2.5. AFI 40-201, Control of Radiological Health Hazards
- 2.6. AFI 91-302, Air Force Occupational Safety and Environmental Fire Prevention and Health (AFOSH) Standards
- 2.7. AFOSH STD 161-17, Standardized Occupational Health Program

## 3. Terms Explained:

- 3.1. Clinical Examination: Special purpose medical examinations administered to monitor the health of personnel exposed to occupational health hazards.
- 3.2. Occupational Health Hazards: A condition which, in the judgment of the Medical Group Commander, or designated representative, constitutes a potentially significant health hazard to workers exposed on an acute or chronic basis.

# 4. Policy:

- 4.1. During the design and procurement of new projects, occupational health hazards will be anticipated both to prevent new hazards and to eliminate old hazards through engineering control.
- 4.2. People exposed to occupational health hazards will be trained and protected as necessary to make sure that they do not suffer any short or long term effects from their exposure.
- 4.3. All non-administrative work areas will be surveyed at least annually to evaluate occupational health exposures and advise the respective commander of action necessary to eliminate or minimize their effects.
- 4.4. All personnel exposed to occupational health hazards will have a periodic medical evaluation to make sure that they are not suffering any significant effects from their exposure.
- 4.5. Occupational health is the unit commander's responsibility. This instruction is designed to help commanders fulfill this responsibility by outlining all steps in the evaluation and control of occupational health hazards and assigning specific support responsibilities.

### 5. Responsibilities:

- 5.1. Commander 92d Air Refueling Wing: Ensures the policies stated in this instruction are carried out at the highest level in all units subject to this instruction and noted problems receive quick attention.
- 5.2. Medical Group Commander: Conducts the medical aspects of the Occupational Medicine Program according to AFI 48-101.
- 5.3. Base Civil Engineering: Consults with the Medical Group Commander to the extent necessary to make sure that all new projects are evaluated for occupational health impact before final design.
- 5.4. Chief of Supply: Upon request, gives the Medical Group Commander information on the storage and issue of toxic and hazardous substances, as directed in AFM 67-1, "USAF Supply Manual."
- 5.5. Mission Support Squadron (MSS) Provides the Medical Group Commander and Air Force units with computer products for the management of the Occupational Medicine Program.
- 5.6. Chief of Civilian Personnel: Gives the Medical Group Commander and all units the necessary information to make sure that civilian personnel subject to this instruction are given authorized medical examinations.
- 5.7. Unit Commanders: Implement the policies of this directive and provide necessary administrative support according to the procedures specified in paragraph 4. and AFM 30-130, Volume II.
- 5.8. Non-Air Force Commanders: Identify occupational health services required to the Medical Group Commander and give administrative support as needed.

- 5.9. Supervisors: Train and equip personnel to assure a safe and healthful working environment and bring to the attention of the commander any condition which may be a safety and/or health problem. Ensure women understand the necessity of confirming pregnancy at the earliest possible time so that information on their work environment can be assessed and used appropriately.
- 5.10. Workers: Observe safety procedures and use protective equipment as directed by their supervisors. Advise supervisor of suspected pregnancy.

#### 6. Procedures:

- 6.1. Occupational Health Medical Examinations: These are given to military/civilian personnel who are routinely exposed to hazardous conditions. The examination is required periodically with the time period determined by the Aeromedical Council. Questions about who should receive an examination should be directed to Public Health Flight (PHF), ext. 7-5257.
  - 6.1.1. Pre-Placement Examinations: To set the baseline level for all potential toxic exposures, pre-placement must be completed as soon as possible after a worker arrives on base.
    - 6.1.1.1. Active Duty Military. During initial clearance onto the base, the supervisor must submit a worksheet, Assignment/Personnel Action, to 92 MSS/MSMEC on every new individual.
    - 6.1.1.2. Civilian Workers. Upon notification of hiring, the agent at the Civilian Personnel Office will call Physical Examinations Section (PES) for a pre-employment physical which will be completed before final acceptance of the employees into their positions.
  - 6.1.2. Termination Examinations: These are given upon permanent removal from the exposure environment. Commanders will ensure these examinations are given to all applicable personnel.
- 6.2. Computer Listing of Personnel for Clinical Examinations. Public Health Flight (PHF) will provide an occupational exam roster to Physical Exams.
- 6.3. Scheduling and Completing Examinations:
  - 6.3.1. Each organization's health care monitor will receive individual letters from 92d AMDS Physical Examination Section (PES). The letter will include which physicals the personnel require and time and date of available appointments.
  - 6.3.2. Scheduling problems should be discussed with PES.
- 6.4. Certifying Receipt of Occupational Physical Examinations:
  - 6.4.1. PHF completes a computer roster. After the examinations have been completed, PES will note on the roster by the end of each month people who completed their examinations, were no-shows, or their supervisors called and canceled. PHF will update the computerized Occupational Health Program.
  - 6.4.2. All no-shows and cancellations will be rescheduled for the following month by PHF. No-show letters will be sent to the squadrons. PHF will inform the 92 Medical Group Commander of the individual unit and combined non-compliance rate.
- 6.5. Deleting Names From the Clinical Examinations Roster: PHF will delete names from the computerized program if they PCS/separate.
- 6.6. Computer Support: PHF will establish a recurring DESIRE requirement through MSS/CCPO in accordance with AFM 30-130, Volume 1, Chapter 9. The DESIRE listing will include the names of

incoming personnel, SSAN, grade, and unit assignment in accordance with AFM 30-130 referenced above.

- 6.7. Training and Equipment: The supervisor will assure that all personnel exposed to an occupational health hazard are trained and equipped according to the recommendations of the Medical Group Commander and any other applicable directives. Initial training on hazardous noise will be conducted and documented by PHF. Annual fit testing and education for respirators and annual education on radiation under the Thermoluminiscent Dosimetry (TLD) Program will be conducted and documented by Bioenvironmental Engineering. All other initial and periodic training will be conducted by shop supervisors. Shop supervisors are reminded during shop visits that PHF can provide technical assistance for initial and periodic training if requested.
  - 6.7.1. Hazard Communication Supervisor Training (HAZCOM): Supervisor HAZCOM training will be conducted by PHF. Supervisors will provide workplace specific HAZCOM training to their personnel.
- 7. Industrial shop operations can change with mission requirements, which can change occupational physical examination requirements. For this reason, each organization should call Bioenvironmental Engineering, whenever there are occupational health concerns. These concerns would include possible deficiencies in ventilation systems, exposure problems associated with chemical use, radiation (ionizing, radio frequency, laser), noise, etc.
- 8. PHF will conduct periodic shop visits when a problem arises or on request. Training updates will be completed at this time, along with checks for occupational health hazards and personal protective equipment. PHF will only conduct annual shop visits on shops requiring occupational exams and those that have exposure to ionizing/non-ionizing/intrinsic radiation. A training package will be sent to shops that have training requirements.
- 9. Some work restrictions for pregnant females may be appropriate, but complete excuse of a pregnant woman from all duties before delivery is seldom indicated. Duty restrictions, if required, will be based on objective medical reasons related to the work environment.

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